

02/22/08 14:08

301 227 1868

OFC OF COUNSEL

002/007

Attorney's Docket No.: 84488

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Rafael Rivera

Serial No. : 10/650,678

Filed : August 29, 2003

Title : BI-LEVEL DUAL HOISTING CONTAINER TRANSPORT CRANE

Art Unit : 3652

Examiner : James W. Keenan

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

REQUEST FOR REFUND UNDER 37 CFR 1.26(a)

This is a request under 37 CFR 1.26(a) for a refund of \$750.00 charged in error to deposit account 50-0958 for the above identified patent application in response to the Request for Statutory Invention Registration (SIR) under 35 U.S.C. 157 filed January 26, 2006. Please credit the refund of \$750.00 to deposit account 50-0958.

Applicant filed a Request for Statutory Invention Registration (SIR) under 35 U.S.C. 157 on January 26, 2006. Under 37 CFR 1.17(o), the fee for requesting publication of a SIR is \$1840 reduced by the amount of the application basic filing fee paid. As shown in the Deposit Account Statement of September 2003 (copy attached), Applicant paid a basic filing fee for utility patent application of \$750.00 for the above identified application.

In the Request for SIR (copy attached), Applicant noted the credit of \$750.00 for the previously paid basic filing fee. The correct total fee was \$1090.00, computed by subtracting \$750.00 from \$1840.00.

In the Deposit Account Statement of February, 2006 (copy attached), Applicant noted a charge of \$1840.00 on February 3, 2006 for the above identified application. This is an overpayment of \$750.00.

02/22/08 14:07 301 227 1968

OFC OF COUNSEL

003/007


Applicant : Rafael Rivera
Serial No. : 10/650,678
Filed : August 29, 2003
Page : 2 of 2

Attorney's Docket No.: 84488

Therefore, Applicant requests a refund of the overpayment of \$750.00. Please credit the refund of \$750.00 to deposit account 50-0958. If there are any questions, please contact the undersigned attorney at the number listed below.

Respectfully submitted,

Date: 22 February 2006


Scott R. Boalick
Reg. No. 42,337

Enclosures:

- (1) Copy of Request for Statutory Invention Registration filed January 26, 2006 (2 pages)
- (2) Copy of Deposit Account Statement for September 2003 (1 page)
- (3) Copy of Deposit Account Statement for February 2006 (1 page)

Customer No. 38092
Office of Counsel (Patents)
Naval Surface Warfare Center
Carderock Division
Code 004
9500 MacArthur Blvd.
West Bethesda, MD 20817-5700

(301) 227-1835

02/22/06 14:07

301 227 1988

OFC OF COUNSEL

004/007

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 04/30/2006. OMB 0551-0036
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Request for Statutory Invention Registration

Application Number 10/650,678, or ☐ attached hereto

Filed: 29 AUG 2003

Applicant(s): Rafael Rivera

Title: BI-LEVEL DUAL HOISTING CONTAINER TRANSPORT CRANE

A. In the above identified patent application, I hereby:

1. Request and authorize the Director of the U.S. Patent and Trademark Office to publish the above identified regularly filed patent application as a Statutory Invention Registration. (35 U.S.C. 157)
2. Waive the right to receive a United States patent on the same invention claimed in the above identified patent application. These rights, which are waived, include those specified in 35 U.S.C. 183 and 271 through 289 as well as all attributes specified for patents in any other provisions of law other than title 35, United States Code. The waiver includes, but is not limited to, the remedies under 19 U.S.C. 1337, 22 U.S.C. 2356 and 28 U.S.C. 1498. (35 U.S.C. 157(c))
3. Understand that the above waiver will be effective pursuant to 37 CFR 1.293 upon publication of the Statutory Invention Registration to waive the inventor's right to receive a United States patent on the invention claimed in the Statutory Invention Registration. (37 CFR 1.293(b)(1))

4. State that, in my opinion, the disclosure and claims of the above identified patent application meet the requirements of 35 U.S.C. 112. (37 CFR 1.293(b)(3))
5. State that, in my opinion, the above identified patent application complies with the requirements for printing as set forth in the Rules of Practice for Patent Cases, 37 CFR Part 1. (37 CFR 1.293(b)(4))

6. Enclose the fee set forth in 37 CFR 1.17(n) or (o) for requesting publication of a Statutory Invention Registration:

- ☐ A first Office Action has not been mailed in the above application, 37 CFR 1.17(n) (fee code 1804) \$ _____
- ☒ A first Office Action has been mailed in the above application, 37 CFR 1.17(o) (fee code 1805) \$ 1840.00

Request fee \$ _____

MINUS BASIC FILING FEE, IF PREVIOUSLY PAID

- ☒ Basic filing fee for utility patent application set forth in 37 CFR 1.16(a);
- ☐ Basic filing fee for design patent application set forth in 37 CFR 1.16(f); or
- ☐ Basic filing fee for plant patent application set forth in 37 CFR 1.16(g)
- Minus basic filing fee \$ _____

-750.00

Payment charged to credit card _____ Form PTO-2038 is attached. Amount due \$ 1090.00

Amount enclosed by check or money order _____

Please charge Deposit Account No. 50-0958 the amount of \$ 1090.00. A duplicate copy of this form is attached.

If payment of any additional fee is required for publication of the Statutory Invention Registration, charge such amount to Deposit Account No. 50-0958. A duplicate copy of this form is attached.

* Where this request is submitted at the time the application is filed, the filing fee is included in the fee.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 157. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 24 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 04/30/2008, OMB 0851-0038
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

B. For printing of the Statutory Invention Registration front page, if desired, list below the name(s) of not more than 3 registered patent attorneys and agents OR alternatively, the name of a firm having as a member a registered patent attorney or agent. If no name is listed below, no name will be printed on the Statutory Invention Registration.

Jacob Shuster

C. Name of assignee, if any, for printing on the Statutory Invention Registration The United States of
America as represented by the Secretary of the Navy

Address (City and State or Country) Washington, DC

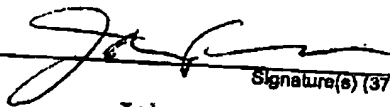
State of Incorporation, if assignee is a corporation _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

The party or parties signing this form are:

☒ attorney or agent of record. Registration Number 29,378

☐ applicant(s) and any assignee



Signature(s) (37 CFR 1.293(a)) 1/25/06

John Forrest

Typed or Printed Name(s)

29,378

Registration Number, if applicable

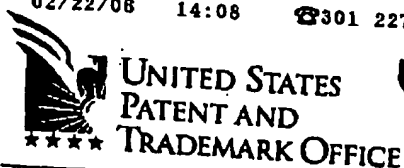
301-227-1835

Telephone Number

02/22/08 14:08 301 227 1968

OFC OF COUNSEL

008/007



MONTHLY STATEMENT OF DEPOSIT ACCOUNT

To replenish your deposit account, detach and return top portion with your check. Make check payable to Director of Patents & Trademarks.

NAVAL SURFACE WARFARE CENTER, CARDEROCK FINA
JOHN FORREST (CODE 004)
9500 MACARTHUR BLVD.

WEST BETHESDA MD 20817-5700

Under Secretary of Commerce for Intellectual Property and
Director of the United States Patent and Trademark Office
Washington, DC 20231
www.uspto.gov

Account No.	500958
Date	9-30-03
Page	1

PLEASE SEND REMITTANCES TO:
U. S. Patent and Trademark Office
P.O. Box 70541
Chicago, IL 60673

DATE POSTED MO. DAY YR.	CONTROL NO.	DESCRIPTION (Serial, Patent, TM, Order)	DOCKET NO.	FEE CODE	CHARGES/ CREDITS	BALANCE
9 2 03	127	10650662				
9 2 03	158	10650678	84,487	1001	750.00	104339.00
9 2 03	159	10650679	84,488	1001	750.00	103589.00
9 4 03	2	09790487	84,530	1001	750.00	102839.00
9 4 03	3	09790487	82,546	1401	320.00	102519.00
9 5 03	17	10641586	82,546	1402	320.00	102199.00
9 8 03	49	10654962		8021	40.00	102159.00
9 8 03	87	10654885	84,155	1001	750.00	101409.00
9 8 03	109	60500236	84,134	1001	750.00	100659.00
9 8 03	110	60500235	84,298	1005	160.00	100499.00
9 15 03	12	10650662	84,297	1005	160.00	100339.00
9 15 03	64	10382930		8021	40.00	100299.00
9 15 03	64	10622173		8021	40.00	100259.00
9 16 03	34	6105716		8021	40.00	100219.00
9 16 03	38	5551369		1551	890.00	99329.00
9 16 03	39	5551641		1552	2050.00	97279.00
9 17 03	101	10650678		1552	2050.00	95229.00
9 17 03	103	10650679		8021	40.00	95189.00
9 26 03	222	10654962		8021	40.00	95149.00
9 26 03	224	10654885		8021	40.00	95109.00
				8021	40.00	95069.00
AN AMOUNT SUFFICIENT TO COVER ALL SERVICES REQUESTED			OPENING BALANCE	TOTAL CHARGES	TOTAL CREDITS	CLOSING BALANCE

MS020A (2/2003)

*** O.D. INDICATES OVERDRAWN

Deposit Account Statement

Page 1 of 1


**United States
Patent and
Trademark Office**

Return To:
USPTO
Home
Page
Finance
Online
Shopping
Page

Deposit Account Statement

Requested Statement Month: February 2006

Deposit Account Number: 500958

Name:

NAVAL SURFACE WARFARE CENTER, CARDEROCK DIVISION

Attention:

JOHN FORREST (CODE 004)

Address:

9500 MACARTHUR BLVD.

City:

WEST BETHESDA

State:

MD

Zip:

20817-5700

Country:

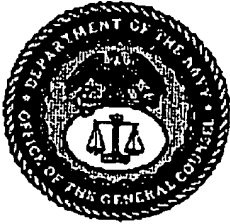
UNITED STATES OF AMERICA

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
02/02	10	10856358	84,735	1501		
02/02	11	10856358	84,735	8001	\$1,400.00	\$178,646.00
02/03	1	10850678		1805	\$30.00	\$178,616.00
02/03	52	11011650	83,773	1501	\$1,840.00	\$176,776.00
02/03	53	11011650	83,773	1501	\$1,400.00	\$175,376.00
02/06	38	10960718		8001	\$30.00	\$175,346.00
02/06	37	10960718		1501	\$1,400.00	\$173,946.00
02/08	49	11033619		8001	\$30.00	\$173,916.00
02/06	50	11033619		1501	\$1,400.00	\$172,516.00
02/08	776	10856360		8001	\$30.00	\$172,486.00
02/10	73	10829616		8021	\$40.00	\$172,446.00
02/10	74	10829616		1501	\$1,400.00	\$171,046.00
				8001	\$30.00	\$171,016.00

START BALANCE	SUM OF CHARGES	SUM OF REPLENISH	END BALANCE
\$180,046.00	\$9,030.00	\$0.00	\$171,016.00

Need Help? | [USPTO Home Page](#) | [Finance Online Shopping Page](#)

THIS FACSIMILE TRANSMISSION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED, AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE PERSON WHO RECEIVES THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS HEREBY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY THE SENDER IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO THE SENDER AT THE BELOW ADDRESS VIA THE U.S. POSTAL SERVICE.



OFFICE OF COUNSEL (CODE 004)
NAVAL SURFACE WARFARE CENTER
CARDEROCK DIVISION
9500 MACARTHUR BOULEVARD
WEST BETHESDA, MARYLAND 20817-5700



VOICE: (301) 227-3566 (General Law)
(301) 227-1834 (Intellectual Property Law)
DSN: 287-XXXX
FAX: (301) 227-1968
E-MAIL: stacey.finley@navy.mil

Date: Tuesday, February 22, 2006
From: Stacey C. Finley
To: Office of Finance - Deposit Account Branch, Maintenance Fee
Branch and Refund Branch, U.S. Patent and Trademark Office,
phone (571) 272-6500, fax, (571) 273-6500

Total Number of Pages Sent (Including This Page): 7

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office (Fax No. (571) 273-6500) on Tuesday, February 22, 2006

STACEY C. FINLEY

Remarks: Request for a refund in the amount of \$750.00 due to the previous payment of basic filing fee.

In re application of
Rafael Rivera
Attorney Docket No.: 84,488
Serial No. 10/650,678
Filed: August 29, 2003
For: BI-LEVEL DUAL HOISTING
CONTAINER TRANSPORT CRANE

Art Unit: 3652

Examiner: James W. Keenan

JAN 26 2006

PTO/SB/84 (11-04)

Approved for use through 04/30/2006. OMB 0651-0036

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Request for Statutory Invention RegistrationApplication Number 10/650,678, or ☐ attached heretoFiled: 29 AUG 2003Applicant(s): Rafael RiveraTitle: BI-LEVEL DUAL HOISTING CONTAINER TRANSPORT CRANE

A. In the above identified patent application, I hereby:

1. Request and authorize the Director of the U.S. Patent and Trademark Office to publish the above identified regularly filed patent application as a Statutory Invention Registration. (35 U.S.C. 157)
2. Waive the right to receive a United States patent on the same invention claimed in the above identified patent application. These rights, which are waived, include those specified in 35 U.S.C. 183 and 271 through 289 as well as all attributes specified for patents in any other provisions of law other than title 35, United States Code. The waiver includes, but is not limited to, the remedies under 19 U.S.C. 1337, 22 U.S.C. 2356 and 28 U.S.C. 1498. (35 U.S.C. 157(c))
3. Understand that the above waiver will be effective pursuant to 37 CFR 1.293 upon publication of the Statutory Invention Registration to waive the inventor's right to receive a United States patent on the invention claimed in the Statutory Invention Registration. (37 CFR 1.293(b)(1))
4. State that, in my opinion, the disclosure and claims of the above identified patent application meet the requirements of 35 U.S.C. 112. (37 CFR 1.293(b)(3))
5. State that, in my opinion, the above identified patent application complies with the requirements for printing as set forth in the Rules of Practice for Patent Cases, 37 CFR Part 1. (37 CFR 1.293(b)(4))
6. Enclose the fee set forth in 37 CFR 1.17(n) or (o) for requesting publication of a Statutory Invention Registration:

- ☐ A first Office Action has not been mailed in the above application, 37 CFR 1.17(n) (fee code 1804) \$ _____
- ☒ A first Office Action has been mailed in the above application, 37 CFR 1.17(o) (fee code 1805) \$ 1840.00
- Request fee \$ _____

MINUS BASIC FILING FEE, IF PREVIOUSLY PAID

- ☒ Basic filing fee for utility patent application set forth in 37 CFR 1.16(a); -750.00
- ☐ Basic filing fee for design patent application set forth in 37 CFR 1.16(f); or
- ☐ Basic filing fee for plant patent application set forth in 37 CFR 1.16(g)
- Minus basic filing fee \$ _____
- Amount due \$ 1090.00

Payment charged to credit card _____ Form PTO-2038 is attached.

Amount enclosed by check or money order _____

Please charge Deposit Account No. 50-0958 the amount of \$ 1090.00. A duplicate copy of this form is attached.If payment of any additional fee is required for publication of the Statutory Invention Registration, charge such amount to Deposit Account No. 50-0958. A duplicate copy of this form is attached.

* Where this request is submitted at the time the application is filed, the filing fee is included in the fee.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 157. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 24 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

03/20/2006 SDIRETA1 00000003 500958 10650678

01 FC:1805 1090.00 DA

PAGE 2/9 * RCVD AT 1/26/06 10:24:03 AM [Eastern Standard Time] * SVR:USPTO-EFAXF-6/29 * DNIS:2738300 * CSID:301 227 1968 * DURATION (mm-ss):06-28

Adjustment Date: 03/20/2006 SDIRETA1
 02/03/2006 AGRAY1 00000001 500958 10650678
 01 FC:1805 1840.00 CR

PTO/SB/R4 (11-04)

Approved for use through 04/30/2008. OMB 0861-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

- B. For printing of the Statutory Invention Registration front page, if desired, list below the name(s) of not more than 3 registered patent attorneys and agents OR alternatively, the name of a firm having as a member a registered patent attorney or agent. If no name is listed below, no name will be printed on the Statutory Invention Registration.

Jacob Shuster

- C. Name of assignee, if any, for printing on the Statutory Invention Registration The United States of America as represented by the Secretary of the Navy

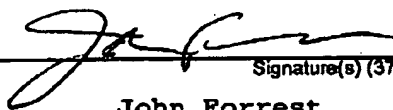
Address (City and State or Country) Washington, DCState of Incorporation, if assignee is a corporation

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

The party or parties signing this form are:

☒ attorney or agent of record. Registration Number 29,378

☐ applicant(s) and any assignee

Signature(s) (37 CFR 1.293(a))1/25/06John ForrestTyped or Printed Name(s)29,378301-227-1835Registration Number, if applicableTelephone Number

[Page 2 of 2]

JAN 26 2006

PTO/SB/21 (09-04)

Approved for use through 07/31/2008, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/650,678	
	Filing Date	28 August 2003	
	First Named Inventor	Rafael Rivera	
	Art Unit	3652	
	Examiner Name	James W. Keenan	
Total Number of Pages in This Submission	9	Attorney Docket Number	84,488

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): REQUEST FOR STATUTORY INVENTION REGISTRATION (SIR); PRELIMINARY AMENDMENT
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Office of Counsel, Code 004, NSWC Carderock Division	
Signature		
Printed name	Scott R. Boalick	
Date	January 26, 2006	Reg. No. 42,337

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Stacey C. Finley	Date 26 JAN 06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

☒ **BLACK BORDERS**

☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**

☐ **FADED TEXT OR DRAWING**

☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**

☒ **SKEWED/SLANTED IMAGES**

☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**

☐ **GRAY SCALE DOCUMENTS**

☒ **LINES OR MARKS ON ORIGINAL DOCUMENT**

☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**

☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.